## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	C C00495028
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee Murphy Vogel Askew Reilly LLC	Date of Public Distribution/Dissemination  M M O O O O O O O O O O O O O O O O O
Mailing Address 1199 N Fairfax St	
Ste 220	Amount
City State Zip Code	8599.85
Alexandria VA 22314-1437	Transaction ID: VN7GDA1A067 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	M = M / D = D / Y = Y = Y
	e Sought: X House District: 24
Salud Carbajal Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Siale Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	/ U = V   Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calcinati Total To Bate	ursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	8599.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	8599.85
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
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Signature	